

Kansas Coalition of Public Retirees



History (Recent) of COLA Requests & A Brief History of KCPR Actions

1. KCPR and its related associations worked hard to achieve legislation which contained a COLA. This was achieved upon the passage of legislation which established Tier II. Also achieved was a one-time \$300 bonus in 2007 and again in 2008 for KPERS some retirees and beneficiaries.
2. Following the 'KPERS Commission' of 2011, legislation established Tier III and removed the COLA provision from Tier II.
3. Our next attempt at a COLA was in 2014 during the Brownback era. HB 2539 proposed a 3% COLA.
4. In 2015 KCPR consulted with a ranking senator, KPERS, and the Kansas Revisors Office. After consultation with them and the KPERS actuary, KCPR proposed a 3,2,1 % COLA. The percentages were based on the number of years a member had been retired. This concept was submitted in January 2016 as HB 2542. (This bill was never acted upon and died because 2016 was not a carry-over year.)
5. The 3,2,1% concept was resubmitted in 2017 as HB2023. (With adjusted retirement dates.) No legislative action was taken.
6. HB2023 rolled over in 2018. We were unable to get the bill out of committee.
7. The concept was submitted in 2019 as HB2100. It was 'heard' but once again was stuck in committee.
8. HB2100 rolled over to 2020 and again died because we could not get it out of committee.
9. In 2021, the unique COVID-19 year, KCPR was never able to get the concept reintroduced as a bill. Other somewhat promising KPERS legislation was introduced, but not a COLA as such. A 13th check concept was introduced, but we did not support it. There are approximately 105,000 retirees and beneficiaries in the KPERS system. The 13th check bill would have addressed 45,000 members while the KCPR COLA concept would have addressed approximately 80,000. Additionally, we reasoned that if a 13th check bill passed, any further benefit increase would be ignored for years. It was noted that there MIGHT be a slight positive movement toward a benefit increase in the Kansas House, not so in the Kansas Senate.

A Brief History of KCPR Actions

KCPR began working toward a COLA in 2004. The quest for a COLA was in fact why KCPR was formed. This all began when the Olathe Unit of the Retired Educators wrote Governor Sebelius a letter asking that a COLA be considered, and she never responded. This lack of response led us to look for groups with like desires, which led to KCPR (Kansas Coalition of Public Retirees) being formed.

The following is a brief review of the resistance we faced:

1. Initially KCPR was ignored. We refer to this period as the “Shooo Fly (Don’t Bother Me)” era. For instance, a friend of mine and I were looking for a Senator we did not know, and he apparently took off his name tag so he would not have to talk to us. We unknowingly walked past him.
2. KPERS was not designed with a benefit increase. However, there have been 5 bonuses and 15 COLAs or benefit increases offered. Actually 16, but the last was a small, closed group that only impacted 66 members. So, we were finally able to beat down this excuse.
3. Another challenge was the origin of the Unfunded Actuarial Liability. The overriding cause of this legacy debt was the underfunding of the actuarial calculated amount by the legislature for 25 years. Stating that fact was taboo until Governor Brownback finally publicly admitted underfunding was the main cause of the UAL.
4. Under Tier II, new hires were granted a guaranteed COLA. This COLA was wiped out by the Tier III Legislation.
5. There were two \$300 Bonuses authorized in 2007 and 2008.
6. The ‘KPERS Commission’ was designed to eliminate KPERS as we know it and turn it in to a 401k type of system.
7. This was avoided by the inception of Tier III.
8. By 2019 – the excuse was, “We know you need one and deserve one, but we cannot afford one.”
9. In 2020 we heard: “We are NOT going to talk about it until the KPERS Trust Fund is funded at 80%.”
10. In 2021 – An additional \$2 Billion bond has been proposed. This is good because it reduces the Unfunded Actuarial Liability and will likely increase the KPERS funded level of the present 70% closer to an 80% funded level.